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CONFIRMATION NO. 7211

<b>SERIAL NUMBER</b> 09/229,283	<b>FILING OR 371(c) DATE</b> 01/13/1999 <b>RULE</b>	<b>CLASS</b> 536	<b>GROUP ART UNIT</b> 1642	<b>ATTORNEY DOCKET NO.</b> 48012
<b>APPLICANTS</b> DAVID E. FISCHER, NEWTON, MA; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/071,420 01/14/1998 <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 04/16/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>EM</i> Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 12
			<b>INDEPENDENT CLAIMS</b> 3	
<b>ADDRESS</b> 40679				
<b>TITLE</b> USE OF MICROPHTHALMIA FOR DIAGNOSIS, PROGNOSIS AND/OR TREATMENT OF MELANOMA				
<b>FILING FEE RECEIVED</b> 890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees	
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